

Part of

[Education and childcare during coronavirus](#)



Guidance

# COVID-19: guidance for supervised toothbrushing programmes in early years and school settings

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This guidance applies to:

- public health teams and local authority commissioners of supervised toothbrushing programmes
- oral health teams and other providers involved in the provision of supervised toothbrushing programmes
- early years and school staff who implement supervised toothbrushing programmes for children in their care

## Background

Poor oral health in childhood has a significant impact on children and families, with tooth decay being the most common reason for 6 to 10 year olds being admitted to hospital to have teeth removed. In 2016 Public Health England published guidance to [support the commissioning and delivery of supervised toothbrushing programmes](#) to arrange these. This evidence informed, safe and had clear accountability and reporting arrangements. This guidance also included infection prevention and control advice.

In the containment phase of the COVID-19 pandemic such programmes ceased, as schools and childcare settings limited their operations. On the 12 May 2020 guidance was issued to educational and childcare settings that from the 1 June 2020 at the earliest, educational settings would be asked to welcome back children in early years, reception year 1 and year 6 alongside priority groups. On 2 July 2020, the Department for Education confirmed that schools and other settings will open in full from the autumn 2020 school term and [guidance](#) has been published to support this. Therefore, supervised toothbrushing programmes may be re-established from then. Such programmes generally take place in nursery and reception classes.

The government has published guidance on [safe working in education, childcare and children's social care settings](#), including the use of personal protective equipment (PPE). It states that most staff in education, childcare and children's social care settings will not require PPE beyond what they would normally need for their work, even if they are not always able to maintain 2 metres from others. It also confirms that when cleaning, usual products should be used such as detergents and bleach and that all education, childcare and children's social care settings should follow Public Health England guidance on [cleaning in non-healthcare settings](#). This guidance would also be relevant to cleaning related aspects of the supervised toothbrushing programmes in these settings.

## Purpose of this guidance

The purpose of this guidance is to update the infection prevention control aspects of supervised toothbrushing programmes. It seeks to manage any public health risk arising from the COVID-19 pandemic against the significant oral health improvement benefits of daily supervised toothbrushing. This guidance should be read alongside:

- the PHE [supervised toothbrushing toolkit](#)
- actions for [early years and childcare providers](#) and [schools](#) during the COVID-19 pandemic

Prior to recommencing programmes, local risk assessments should be conducted and if further infection prevention control advice is needed this should be sought from local health protection teams.

## Toothbrushing programme models

Until now 2 main models have been used for supervised toothbrushing. These are:

- dry brushing models where children brush their teeth without the use of water or sinks. This can take place with children seated or standing
- wet brushing models where children brush their teeth using water, usually stood at sinks.

The wet brushing model is no longer recommended during the COVID-19 recovery phase as it is considered more likely to risk droplet and contact transmission and offers no additional benefit to oral health over dry brushing.

## Dry toothbrushing model

Supervisors and children (under supervision) should wash their hands or use hand sanitiser before and after the toothbrushing session.

Supervisors should cover any cuts, abrasions or breaks in their skin with a waterproof dressing before commencing.

Supervisors should dispense the toothpaste onto a clean surface such as a plate, individual paper towel or tissue square to allow each child to apply the toothpaste to their brush.

Each child should collect their toothpaste, a tissue or paper towel (so they can spit any excess toothpaste into this after brushing), and their toothbrush from the storage system.

Each toothbrush should be individually identifiable enabling each child to recognise their own brush.

Children may stand or sit while toothbrushing however the area surrounding them should be easy to clean.

After brushing children can spit excess toothpaste into the tissue or paper towel (encourage children to raise the tissue to their mouths to do so) and wipe their mouths.

Tissue or paper towel and toothpaste paper should be disposed of immediately in a waste bag.

After toothbrushing supervisors should clean the area where the toothbrushing has taken place with detergents and bleach.

Observed by the supervisor each child should in turn rinse their own toothbrush and its handle at a sink under cold running water. Toothbrushes should be rinsed straight away. The toothpaste should not be allowed to dry on the brush. Water should be left running to avoid each child touching the tap.

Toothbrushes should not come into contact with the sink or tap.

Under supervision each child then returns their own toothbrush to the storage system to air dry. Storage system lids should be replaced at this stage if there is sufficient air circulation to allow the toothbrushes to dry before next use.

Toothbrushes must not be washed together in the sink.

After toothbrushing supervisors are responsible for cleaning sinks and surfaces following national guidance and using standard cleaning products such as detergents and bleach.

After toothbrushing is complete children and supervisors should wash their hands.

## Cleaning and storage of toothbrushes

Toothbrushes must not be soaked in bleach or other cleaner or disinfectant.

Toothbrushes which are dropped on the floor should be discarded in normal refuse.

Toothbrushes should be stored in appropriate storage systems or individual ventilated holders which enable brushes to stand in the upright position ensuring that toothbrushes are not in contact and do not touch the lid to avoid cross contamination with saliva.

## Cleaning and use of storage systems

There should be a separate storage system for each 'group' or 'bubble' of children where applicable.

Storage systems display symbols corresponding with those on the toothbrushes to allow individual identification of toothbrushes.

Each toothbrush should always be replaced into the same hole in their storage system following toothbrushing.

Storage systems should allow air-flow around the toothbrush heads to enable the toothbrushes to dry. Covers should only be used once brushes have dried or if they allow sufficient ventilation to allow drying.

Storage systems are stored within a designated toothbrush storage trolley or in a clean, dry cupboard. Storage systems in toilet areas must have manufacturers' covers which allow the free flow of air, be stored at adult height or in a suitable toothbrush storage trolley.

Dedicated household gloves should be worn when cleaning storage systems and sinks as using hot water. Cleaning of the storage systems should ideally be done once children have collected their brushes to commence brushing.

Storage systems, trolleys and storage areas should be cleaned and dried weekly (more if soiled). Rinse with hot water then using standard cleaning products such as detergent and bleach.

Manufacturers' guidelines should be followed when cleaning and maintaining storage systems including dishwasher cleaning where appropriate.

The storage system should not be placed directly beside where toothbrushing takes place or beside the toilet area to avoid contamination via droplet and contact spread.

Storage systems should be replaced if cracks, scratches or rough surfaces develop.

## Supervised toothbrushing and suspected COVID-19 case

If anyone in an early years or school setting becomes unwell with COVID-19 symptoms, they must be collected and sent home and follow the [Stay at home: guidance for households with possible or confirmed coronavirus \(COVID-19\) infection](#) guidance. They should get a test which can be booked online through the [NHS website](#) or contact NHS 111.

In the event of a confirmed case of COVID-19 follow the advice of the local health protection team and ask for advice regarding the supervised toothbrushing programme, this will ensure advice provided is consistent and up to date.

Further details on the action to take in response to any infection are available for [early years and childcare providers](#) and [schools](#).

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